Under	13	PR 1 0 2009	no persons		. Patent and T	RTO/SB/21 (09-08) Approved for use through 10/31/2008. OMB 0651-0031 Frademark Office; U.S. DEPARTMENT OF COMMERCE formation unless it displays a valid OMB control number.			
TRANSMITTAL FORM				Application Number	i "	10/570,764			
				Filing Date	August 22	August 22, 2006			
				First Named Inventor	Jens Laur	Jens Laurvig HAUGAARD			
				Art Unit	3753	3753			
(to be used for all correspondence after initial filing)			filing)	Examiner Name	J. C. Fox	J. C. Fox			
Total Number of Pages in This Submission				Attorney Docket Number	50906	·)			
ENCLOSURES (Check all that apply)									
✓ Fee	e Trans	mittal Form		Orawing(s)		After Allowance Communication to TC			
\checkmark	Fe	Fee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Am-	Amendment/Reply		Petition Petition to Convert to a			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
A		er Final		Provisional Application		Proprietary Information			
	Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address Status Letter						
Ext	ension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please Identify below):			
Exp	press A	bandonment Request	F	Request for Refund					
Informati		n Disclosure Statement	CD, Number of CD(s)						
			L	Landscape Table on (CD				
Certified Copy of Priority Document(s)			Remarks						
	Reply to Missing Parts/		Postcard	Receipt					
L Incomple		e Application ply to Missing Parts				···			
		der 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name		Roylance, Abrams, Berdo & Goodman, L.L.P.							
Signature		March Bulis							
Printed name		Mark S. Bicks							
Date		April 10, 2009		Reg. No.	28,770				

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PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE 995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Under the Paper on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/570,764 **Application Number** TRANSMITTAL Filing Date August 22, 2006 For FY 2009 First Named Inventor Jens Laurvig HAUGAARD **Examiner Name** J. C. Fox Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3753 TOTAL AMOUNT OF PAYMENT 540 Attorney Docket No. 50906 METHOD OF PAYMENT (check all that apply) ✓ Check L Credit Card ■ Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 18-2220 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity **Small Entity Application Type** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 330 165 540 270 220 110 Design 220 110 100 50 140 70 Plant 220 110 330 170 165 85 Reissue 330 165 540 650 270 325 Provisional 220 0 110 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 52 26 220 110 Each independent claim over 3 (including Reissues) 390 195 Multiple dependent claims Total Claims Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee (\$) 13 _ - 20 or HP = 0 50 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) 1____ - 3 or HP = _____0 × 210... HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50

Other (e.g.	, late filing surcharge): Brief on Appeal		540
SUBMITTED BY			
Signature	Mul Bulis	Registration No. (Attorney/Agent) 28,770	Telephone (202) 659-9076

Number of each additional 50 or fraction thereof

(round up to a whole number) x

Fee (\$)

Date April 10, 2009

Fee Paid (\$)

Fees Paid (\$)

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Extra Sheets

Non-English Specification, \$130 fee (no small entity discount)

Total Sheets

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4. OTHER FEE(S)

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